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CONFIRMATION NO. 8591

<b>SERIAL NUMBER</b> 09/397,309	<b>FILING OR 371(c) DATE</b> 09/16/1999 <b>RULE</b>	<b>CLASS</b> 705	<b>GROUP ART UNIT</b> 3692	<b>ATTORNEY DOCKET NO.</b> 2854.72	
<b>APPLICANTS</b> JAMES L. BAUER, BRIDGEHAMPTON, NY; MARGARET MASELLA, NEW YORK, NY; <i>CG</i>					
<b>** CONTINUING DATA *****</b> This appln claims benefit of 60/130,830 04/23/1999					
<b>** FOREIGN APPLICATIONS *****</b>					
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> <b>** 10/05/1999</b>					
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance <i>CG</i> Verified and Acknowledged <u>                    </u> Examiner's Signature Initials		<b>STATE OR COUNTRY</b> NY	<b>SHEETS DRAWING</b> 7	<b>TOTAL CLAIMS</b> <del>87</del> 101	<b>INDEPENDENT CLAIMS</b> 6
<b>ADDRESS</b> 21967					
<b>TITLE</b> SYTEM AND METHOD OF OPERATING A DEBIT CARD REWARD PROGRAM					
<b>FILING FEE RECEIVED</b> 3330	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		